

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

2572

Lobbyist's Registration Number

FOR OFFICE USE ONLY  
Postmark Date: 2/16/03

Recd  
FL-1271  
4/10/03

1022574

## Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808. (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME: Robert J. Lee \_\_\_\_\_ Report \_\_\_\_\_ C \_\_\_\_\_  
Last First MI

2. BUSINESSPHONE: (225) 242-1223 \_\_\_\_\_  
Area Code and Phone Number

3. BUSINESS ADDRESS: 2400 West Park, Suite 300, Baton Rouge, LA 70811  
Street and No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

MAILING ADDRESS: 2400 West Park, Suite 300, Baton Rouge, LA 70811  
Street and No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. EMPLOYER: Robert J. Lee, Inc. Business (4113)

5. EMPLOYER'S ADDRESS: 2400 West Park, Suite 300, Baton Rouge, LA 70811  
Street and No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name: Robert J. Lee, Inc. Business

Address: 2400 West Park, Suite 300, Baton Rouge, LA 70811

Business or purpose: Representation of small business concerns

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

MANUALLY DELIVERED

# LOBBYING REGISTRATION FORM

Lobbyist's Registration Number \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

4. Name \_\_\_\_\_

Address \_\_\_\_\_

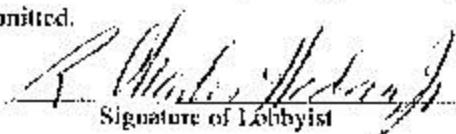
Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [L.S.A.R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

